



**STATE OF WASHINGTON**  
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**  
Aging and Disability Services  
Behavioral Health and Service Integration Administration  
Division of Behavioral Health and Recovery  
P.O. Box 45330, Olympia, WA 98504-5330

February 7, 2014

Toni Hood, Hearings Administrator  
Department of Licensing  
Programs and Services Division  
1125 Washington Street SE - HLB, FL 2  
Olympia, Washington 98501, MS: 48107

RE: New Diagnostic Categories for Substance Use Disorders

Dear Ms. Hood:

This correspondence is to inform Department of Licensing (DOL) staff of changes in the way Substance Related Disorder is diagnosed as of May 18, 2013.

New diagnostic criteria for Substance Related and Addictive Disorders are listed in the Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-5), which was published on May 18, 2013 (DSM no longer uses Roman numerals in the title).

In that manual the American Psychiatric Association (APA) changed the way Substance Related Disorders are classified and diagnosed.

In the DSM-5 the APA has eliminated the terms "Substance Dependence" and "Substance Abuse" that were used previously in DSM-IV-TR. Those categories have been combined into "Substance Use Disorder" (SUD).

DSM-5 has also revised the criteria used to diagnose these disorders.

One diagnostic criteria previously used in DSM-IV-TR, substance use related legal problems, has been eliminated and another, cravings, has been added to DSM-5. Instead of the 7 Dependence and 4 Abuse criteria used previously, there are now 11 Substance Use criteria. A person must meet at least 2 of the 11 criteria to be diagnosed with a SUD. Meeting 2-3 criteria is considered Mild SUD, 4-5 is considered Moderate SUD, and 6 or more is considered Severe SUD.

In DSM-5, mild SUD is the equivalent of Substance Abuse in DSM-IV-TR, while Moderate and Severe SUD are equivalent to Substance Dependence. All three of these diagnostic categories require some kind of treatment, not just education, to help the person resolve the life problems resulting from problematic use. Only if there was no diagnosis would education alone be recommended.

Division of Behavioral Health and Recovery (DBHR) certified programs are required to use the revised DSM-5 criteria as of July 1, 2013, for making diagnoses.

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In collaboration with DBHR, DOL has revised the Assessment and Treatment Report (ATR) form, in order to be consistent with the terminology and criteria used by DBHR-certified treatment programs.

I want to thank DOL staff for the cooperation and collaborative approach used to revise the ATR form so it meets the needs of stakeholders.

If you need any further information or technical assistance regarding this or any other issue related to the treatment of Substance Use Disorders, feel free to contact me at (360) 725-3730 or by email at [julian.gonzales@dshs.wa.gov](mailto:julian.gonzales@dshs.wa.gov).

Sincerely,

A handwritten signature in black ink, reading "Julián Gonzales". The signature is fluid and cursive, with the first name "Julián" and last name "Gonzales" clearly distinguishable.

Julián Gonzales  
Certification Supervisor

cc: Mary Pat Casey, DOL  
Brian Barr, DBHR Field Services Manager  
Mary Testa-Smith, DBHR Policy Manager  
DBHR Certification Field Staff